



## TOWN OF AMHERST APPLICATION FOR SECONDHAND SALES LICENSE

Date: \_\_\_\_\_

To the Licensing Authorities:

The undersigned hereby applies for a Secondhand Sales License in accordance with the provisions of the statutes, by-laws, and/or policies relating thereto:

COMPANY: \_\_\_\_\_ DBA: \_\_\_\_\_

ADDRESS OF PREMISES: \_\_\_\_\_

OWNER'S NAME: \_\_\_\_\_

HOURS OF OPERATION: \_\_\_\_\_  
\_\_\_\_\_

STATE CLEARLY THE ITEMS WHICH WILL BE SOLD: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
(Signature of Applicant)

\_\_\_\_\_  
(Phone Number)

\_\_\_\_\_  
(Home Address)

I recommend that the licensee be required to maintain written records of all transactions relative to the following items:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The written record will consist of the name and address of the seller, the date of the transaction and a description of the item, including serial numbers or identifying numbers. This record must be maintained for a two year period. Said items, if still located on premises, are subject to inspection by police officers of the Town of Amherst during normal business hours.

\_\_\_\_\_  
CHIEF OF POLICE

Date Select Board Approved/Denied: \_\_\_\_\_ License # \_\_\_\_\_

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please return this application to the **Select Board's Office**, 4 Boltwood Avenue, Amherst, MA 01002